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CONFIRMATION NO. 5204

SERIAL NUMBER 10/762,714	FILING OR 371(c) DATE 01/22/2004 RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. 1360-001	
APPLICANTS Maxwell Gordon, New York, NY; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 04/27/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>Kenei Clayton</i> Initials <i>RC</i>		STATE OR COUNTRY NY	SHEETS DRAWING 0	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
ADDRESS 47888					
TITLE Analgetic dosage forms that are resistant to parenteral and inhalation dosing and have reduced side effects					
FILING FEE RECEIVED 428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other : _____ <input type="checkbox"/> Credit		